

2015 Girls ASA 14U Class "B" Eastern National Championship
Canton, OH July 22 - 26, 2015



TOURNAMENT PACKET



Willig Field Softball Complex
2300 – 30th Street N.E. Canton, Ohio 44705

Hosted By:
Canton Joint Recreation District
Ohio District 10 ASA Softball

Opening Ceremony Sponsored by:
PAPA BEARS PIZZA OVEN ITALIAN RESTAURANT
4990 Dressler Rd NW, Canton, OH 44718 Phone: 330-493-0090

Canton Joint Recreation District
1414 Market Ave. N, Canton, OH 44714
Phone: 330-456-4521 Fax: 330-454-5884
Email: info@cantonrecreation.com
Web: <http://cantonohio.gov/parksandrecreation/?pg=867>

2015 Girls ASA 14U Class "B" Eastern National Championship Canton, OH July 22 - 26, 2015



Dear Team Manager and Coach,

The Canton Joint Recreation District takes great pride in hosting a National Tournament of this caliber and we are committed to make your experience the best it can be.

The information in this packet will answer most of your questions regarding this tournament. Please read the packet carefully, and if you still have questions, please give us a call.

Remember the deadline for entry into this tournament is July 15, 2015 at 4:00 pm. Completed packets must be received by the Canton Joint Recreation District on or before July 15, 2015 at 4:00 pm. We will contact you once your packet has been received to confirm your registration. Please include a current e-mail address so we can keep you updated with the most current information. E-Mail is our preferred method of communications.

We welcome you to the City of Canton and promise to make this event enjoyable for your team and fans. Good luck in our tournament and please feel free to contact us should you have further questions.

Sincerely,

Matt Kress

Matt Kress
Canton Joint Recreation District Assistant Program Director



Dear Team Manager and Coach,

On behalf of our entire community welcome to Canton/Stark County! We are grateful to host you and your teams. Our partners are excited to treat you to the hospitality our area is known for.



Please share the keepsake wristbands with all of your players, fans and administration. Check out www.VisitCantonStark.com/vipoffer for a list of area partners eager to serve you with deals and discounts when you show them your VIP Visitor wristband. We invite you to explore all of the reasons we are "America's Playing Field!" – from quality sports facilities and national attractions like the Pro Football Hall of Fame to delicious restaurants, unique shopping, arts and live entertainment.

Best of luck to you and your teams, and thank you for visiting Canton/Stark County!

Warm Regards,

Tonja Marshall
Director of Sports Tourism

2015 Girls ASA 14U Class "B" Eastern National Championship Canton, OH July 22 - 26, 2015



Dear Coaches and Managers,

Congratulations, in advance, for qualifying and choosing to participate in the ASA 14U Class 'B' Eastern National Championship 2015. The prestigious level of teams we anticipate in registering will make this tournament very competitive and an exciting week of fastpitch softball.

In this packet, you will find useful information concerning registration and document deadlines, a general schedule of events, general rules and regulations, contact names and phone numbers. Please take a few moments to carefully review all the information to ensure that all deadlines are met and all information is provided to the tournament host/director.

The tournament committee will be posting all tournament information on www.TournamentASA.com. If this website is new to you please visit and register yourself and your team. If you have been registered with TournamentASA.com in past years please update your registration as needed. Once registered you will receive tournament up-dates via e-mail, text or you can view online. The registration is free and everybody (coaches, athletes, parents and fans) can register. I believe you will find this website priceless after becoming familiar with all the information it can provide to your organization.

I am very excited to direct the ASA Eastern National Tournament and look forward to working with the best teams in the ASA Eastern Territory. Please do not hesitate to contact me with any questions or concerns.

Sincerely,

Bev Bilger

Bev Bilger

Canton Tournament Director

cantontourney@neo.rr.com

Staff Assignments and Committee Members

Tournament Director	Bev Bilger	419-651-7010 cantontourney@neo.rr.com
CJRD Assistant Program Director	Matt Kress	330-456-4521 matt@cantonrecreation.com
Housing Coordinator	Ken Groves	330-936-3994 kgroves@neo.rr.com
ASA U.I.C.	To be announced by the ASA National Office	
ASA Official Representative	To be announced by the ASA National Office	
Ohio State ASA Commissioner	Warren Jones	419-651-3335 wjonesjr3@frontier.com
Ohio District 10 ASA Commissioner	Rick Annen	330-904-7335 ramfd@ameritech.net
Field Maintenance Coordinator	Greg Horrisberger	

Committee Members

Ken Groves	Steve Hartman	Lynn Brooks	Dale Hamel
Joe Herrick	Mark Abbuhl	Wally Stuchal	Tim Kidder
			Henry Larocca

Tournament Fact Sheet

Tournaments	2015 Girls Class "B" ASA Eastern National Fastpitch Championship
Age Bracket	14U
Dates	July 22 - 26, 2015
Field Location(s)	Willig Field Softball Complex, 2300 30th Street NE, Canton, OH 44705 (Tournament Headquarters 2nd floor) Carl 'Weis' Park, 2600 Harvard Ave., NW, Canton, OH 44709
Host Address	Canton Joint Recreation District and Ohio District 10 ASA Softball 1414 Market Ave. N., Canton, OH 44714 Phone: 330-456-4521 Fax: 330-454-5884
Director	Bev Bilger E-Mail: cantontourney@neo.rr.com Home Phone: 419-994-3330 Cell Phone: 419-651-7010 Fax: 330-454-5884
Entry Fee	\$450.00 (Payable to Canton Recreation)
Entry Deadline	July 15, 2015 @ 4:00pm

All Official ASA Documents must be signed by your State or Metro Commissioner or Designee

Items Due By Deadline Wed. July 15	<p>Canton Registration Form and Entry Fee (pg. 6)</p> <p>Original Official ASA National Tournament Entry Form signed by your local or state ASA Rep. (pg. 7)</p> <p>Original Official ASA Championship Roster and signed Affidavit, with Parent Signatures (pg. 8 & 9)</p> <p>Original Official ASA Tournament Signature Form (pg. 10)</p> <p style="padding-left: 40px;">Please pre-print or type athletes name (Column 1) and birthdate (Column 3)</p> <p style="padding-left: 40px;">Signatures must be completed at Check-In. Forms signed in advance will not be accepted.</p> <p>ACE Certification, ASA Background Check</p> <p>Copy of Team Insurance (Bollinger Insurance is required and Page 11 completed)</p> <p>Original Official ASA Pick-Up Player Form(s) (if applicable) (pg. 12 & 13)</p> <p>Opening Ceremony Form and Advance Gate Ticket Form and Payment (pg. 14)</p> <p>Team Bio (pg. 15)</p>
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**Mail all tournament documents and registration fee, due by July 17, 2013, to:
Canton Recreation, 1414 Market Ave N, Canton, OH 44714**

Manager's Check-In and Meeting Wed. July 22	<p>Location: McKinley Grand Hotel, 320 Market Ave S, Canton, OH 44702</p> <p>Sign In: 2:00pm-3:00pm Manager's Meeting 3:00pm-4:00pm</p> <p>This is a mandatory meeting and limited to one (1) representative per team.</p>
Items Required at Manager's Check-In Wed. July 22	<p>** The following items must be submitted at check-in if not previously submitted</p> <p>Original Official ASA Championship Roster and signed Affidavit, with Parent Signatures (pg. 8 & 9)</p> <p>Original Official ASA Tournament Signature Form (pg. 10)</p> <p style="padding-left: 40px;">Please pre-print or type athletes name (Column 1) and birthdate (Column 3)</p> <p style="padding-left: 40px;">Signatures must be completed at Player Check-In. Forms signed in advance cannot be accepted</p> <p>ACE Certification</p> <p>ASA Background Check</p> <p>Copy of Team Insurance (Bollinger Insurance is required) and Page 11 completed</p> <p>Original Official ASA Pick-Up Player Form(s) (if applicable) (pg. 12 & 13)</p> <p>Team Bio (pg. 15)</p> <p>Tournament Packets with advance gate passes and additional tournament information will be handed out.</p>
Athlete Check In and Opening Ceremony Wed. July 22	<p>Location: Canton Memorial Fieldhouse, 1815 Harrison Ave NW, Canton, OH 44708</p> <p>Athlete Check-In & Official Team Pictures: 5:00pm – 6:00pm Opening Ceremony: 6:00 pm</p> <p>All teams are requested to participate. Photo ID's are required for all athletes at check-in.</p> <p>The opening ceremony is FREE to all who attend.</p> <p>Sponsored by Papa Bears Pizza Oven Italian Restaurant</p> <p>All roster athletes and 3 coaches per team will receive complimentary pizza, chips and beverage.</p> <p>Additional concessions will be available to spectators.</p> <p>Please be in full uniform for parade of teams and official team photos. Exception: NO Cleats</p>
Format	4 Game Guarantee - 2 Pool Games followed by Double Elimination - Weather Permitting
Pool Draw	<p>Pool play draw will be held on July 17th</p> <p>Teams will NOT be notified of their schedule. Schedules will be posted on www.TournamentASA.com</p>

Tentative Game Schedule	<p>July 23, 2015 – Willig Softball Field Complex and Carl ‘Weis’ Park Fields</p> <p>8:00am: Pool Play begins, scheduled every 2 hours but be prepared to play early</p> <p>Pool Play concludes on Thursday, July 23, 2015</p> <p>Bracket Draw will take place at Willig field (2nd floor – 1 team coach, required)</p> <p>Bracket Draw: 1st and 2nd place teams approx. 6:00pm, 3rd and 4th place teams approx. 8:00pm</p> <p>Teams will NOT be notified of their schedule. Schedules will be posted on www.TournamentASA.com</p> <p>Friday, July 24, 2015, Double Elimination Bracket begins and will conclude on Sunday, July 26, 2015</p>
Infield Practice	No infield practice will be permitted. Warm-up is allowed in designated areas only. Teams may warm-up on the outfield grass if time permits. Teams wishing to practice may reserve a practice field by calling 330-456-4521, Monday – Friday between the hours of 9:00am and 3:00pm. Umpires are available for a fee.
Home Team	A coin toss 15 minutes prior to game time will determine the home team for every game. Home team will reside in the first-base dugout unless the home team occupies a dugout from the previous game.
Line-Up Cards	Teams must provide line-up cards to umpire and opposing team, 15 minutes prior to game time. Line up cards will be provided in Tournament Packet.
Game Times	Follow the times listed on the official tournament schedule. Schedules will be posted on www.TournamentASA.com Game time is forfeit time. Teams should be prepared to play immediately after the preceding game is completed. Please be prepared to play early.
Game Rules	Official 2015 ASA Rule and Regulations will be strictly enforced (Pool Play – Bat Roster)
Game Ball	The official ball for the tournament will be Worth and will be provided by the tournament host.
Run Rules & Time Limits	Fifteen after 3 innings, twelve after 4 innings, eight after 5 innings of play will end the game. No new inning will start after the time limit of one hour and forty minutes. You will complete the current inning and go into international tie breaker, if needed. There will be no time limits for the Semi-Finals and Final games.
Uniforms	Per 2015 ASA Rule. Important Note: Patches or logos of any other softball associations are NOT permitted on uniforms of coaches, players and/or team representatives and must be removed or covered.
Dugout Areas	Limited to roster players, coach, and adult personnel with current ASA Background Checks/ACE Credentials
Conduct	Managers and coaches are to represent themselves in a professional manner and have complete control of their athletes both on and off the field. Any report of damage by hotel management will be dealt with by the Tournament Committee.
Protests	The Tournament Committee will decide all protests. As manager, please be familiar with the rules of the game, including proper protest procedures.
Gift Bag/Pin Exchange	Team gift bags/pin exchange will be scheduled after the Open Ceremony. Please bring enough gift bags to exchange with 20 players from another team. Participation is suggested but optional.
Inclement Weather	In the event of inclement weather, the game must be resumed at the exact point where it was suspended. It is the manager's responsibility to report to the tournament headquarters at Willig Field Complex for rescheduling information. If games are delayed due to weather conditions we will make every attempt to complete the tournament in a timely manner. In the event the tournament cannot be completed within the scheduled time frame, Article 510, General Regulations of Championship Play, Section H.02 will determine the official order of finish.
Awards	Team Trophies: First, Second, Third and Fourth, depending on number of entries. Individual Awards: First, and Second, depending on number of entries. See National Championship Finals, Article 606.B.02, for additional award information
Websites	Pool/Bracket Post: www.TournamentASA.com Canton Recreation District www.cantonrecreation.com http://cantonohio.gov/parksandrecreation/?pg=867 Ohio ASA: www.ohioasasoftball.org National ASA: www.asasoftball.com Stark County: www.visitcantonstark.com
Concession	Concessions will be available at the tournament.
Souvenirs	Souvenirs and T-Shirts will be available throughout the week. Details will be sent out at a later date.
Gate Fees	Advance Purchase Gate Passes: Order information on Page 12 Adult \$30.00, Student & Senior Citizens \$15.00, Children 4 and under free admission. Daily Gate Fees: Adult \$10.00, Student & Senior Citizens \$5.00, Children 4 and under free admission. Children = 4 and under, Student = ages 5 – 12, Adult = age 13 – 62, Senior Citizens = 63 and beyond
Complimentary Gate Entry	<u>ASA Officials</u> : All ASA Officials whose cards state “for the year 2015 and is entitled to all privileges of the ASA as prescribed by the ASA code, including admission to all tournaments and/or games of softball conducted by or under the sanction of the ASA” will be admitted free. <u>Collegiate Coaches</u> with Proper ID will be admitted free.

2015 Girls ASA 14U Class "B" Eastern National Championship
Canton, OH July 22 - 26, 2015



Tournament Entry Application

Entry Fee: \$450.00

Entry Deadline: July 15, 2015

Team Name:	14U "B"	
ASA Sanction #:		
Team Originates From	City:	State:

Head Coach:

Name:			
E-Mail Address:			
Phone #1:	<input type="checkbox"/> Text <input type="checkbox"/> E-Mail	Phone #2:	<input type="checkbox"/> Text <input type="checkbox"/> E-Mail
Mailing Address:			
City:		State:	Zip:

99% communications are through E-Mail, be sure to print clearly and give an e-mail that is read often

Secondary Contact:

Name:			
E-Mail Address:			
Phone #1	<input type="checkbox"/> Text <input type="checkbox"/> E-Mail	Phone #2:	<input type="checkbox"/> Text <input type="checkbox"/> E-Mail

Designated person to handle all medical release information:

Name:			
Position on Team:			
Phone #1	<input type="checkbox"/> Text <input type="checkbox"/> E-Mail	Phone #2:	<input type="checkbox"/> Text <input type="checkbox"/> E-Mail

Make checks payable to and mail completed form/fee to:

Canton Recreation, 1414 Market Ave. N., Canton, OH 44714

FOR OFFICE USE ONLY		Receipt # _____
Date:	Check #	Amt Received:

Amateur Softball Association of America

Official Tournament Entry Form

www.asasoftball.com



THE NATIONAL GOVERNING BODY
OF SOFTBALL

Instructions:

This form must be filled out by the ASA Commissioner (or his/her designee) before the team listed below is allowed to compete in any of the following tournaments (circle type of event):

Regional

National/Territory/HOF

National Championship Finals

Please fill out completely and accurately

YOUTH					
Girls	<input checked="" type="checkbox"/>	Fast	<input checked="" type="checkbox"/>	Gold	<input type="checkbox"/>
Boys	<input type="checkbox"/>	Slow	<input type="checkbox"/>	"A"	<input type="checkbox"/>
				"B"	<input checked="" type="checkbox"/>
ACE Coach	<input type="checkbox"/>			18-U	<input type="checkbox"/>
ASA Insurance Team	<input type="checkbox"/>			16-U	<input type="checkbox"/>
or Individual	<input type="checkbox"/>			14-U	<input checked="" type="checkbox"/>
				12-U	<input type="checkbox"/>
				10-U	<input type="checkbox"/>

ADULT					
Men	<input type="checkbox"/>	Slow	<input type="checkbox"/>	Major	<input type="checkbox"/>
Women	<input type="checkbox"/>	Fast	<input type="checkbox"/>	"A"	<input type="checkbox"/>
Coed	<input type="checkbox"/>	Mod. 9'	<input type="checkbox"/>	"B"	<input type="checkbox"/>
		Mod. 10'	<input type="checkbox"/>	"C"	<input type="checkbox"/>
		Ind.	<input type="checkbox"/>	"D"	<input type="checkbox"/>
		16'	<input type="checkbox"/>	Other	<input type="checkbox"/>
				35-Over	<input type="checkbox"/>
				40-Over	<input type="checkbox"/>
				45-Over	<input type="checkbox"/>
				50-75 Over	<input type="checkbox"/>

Team Information (Print or Type)

Team Name: _____

Manager: _____

Address: _____

City/State/Zip: _____

Home Phone: () Work Phone: () Cell Phone: ()

Fax Number: () Email: _____

The team listed above is currently registered and in good standing with its local ASA Association. This team has qualified to compete in the division and classification of play listed above:

Signed: _____

Association Team is Registered with Association Commissioner & Contact Phone Number Date

This portion of the form shall only be used when the team listed above has qualified for a National Tournament or the National Championship Finals. This form is to be completed by either the tournament director of the qualifying tournament, or the local ASA Commissioner if the team has qualified via one of the following:

1) Registration Berth

2) Returning Team

3) Host Team

The above team has qualified for a national Tournament or the National Championship Finals from: (Please check one)

State/Metro ☐ Regional ☐ National/Territory/HOF Qlfr. ☐ Registration Berth ☐ Returning ☐ Host Team ☐

The above team has qualified to compete in the:

2015 ASA 14U "B" Girls Fastpitch Eastern National

National Tournament or Championship Finals

Signature of Qualifying Tournament Director or
Local ASA Commissioner

Date

Forward a copy of this form and the official ASA Championship Roster and affidavits to the National Tournament or National Championship Finals Tournament Director.

Revision Date: 12/09



OFFICIAL CHAMPIONSHIP ROSTER

LIABILITY WAIVER



I, the signed player or the parent or legal guardian of a minor player named on this roster, acknowledge, agree and understand that: 1.) Voluntarily and of my own free will, I elect to participate as a member of the softball team and league indicated below. 2.) I understand that there are certain risks and hazards involved in participating in softball including, but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants in addition to the acts of pitching, throwing, fielding and catching of the ball, the swinging of the bat, running, jumping, stretching, sliding, diving and collisions with other players and with stationary objects, all of which can cause serious injury or death to me and to other players. Further, I agree that in consideration for right to play as a member of the team designated below and in consideration for permission to play on the field arranged for by the team or league: 1.) I voluntarily elect or accept and solely assume all risk of damages, injury, including death, incurred or suffered by me (a) while practicing or playing as a member of the team so designated, (b) while serving in a non-playing capacity as a team member or observer during practice or play by other teams or by other players on my team, and (c) while on or upon the premise of any and all of the fields arranged for by my team or league for practice or play. 2.) I release, discharge and agree not to sue the team and/or league designated below or any owner or leasee of fields on which softball is played or practiced by my team or the ASA, or their owners, officers, umpires, agents, servants, associations, employees, or any person or entity connected with the team, league, field or the ASA for any claim, damages, cost or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including, but not limited to the negligence, breach of contract or wrongful conduct of these parties hereby released. I further agree that I shall hold harmless and fully indemnify the parties hereby released from any claims, damages, costs including attorney fees, and cause of action which may arise from any claim or cause of action made by me, through me or on my behalf even if the damages, injuries or death are caused in whole or in part by any of the parties or entities hereby released, I ACKNOWLEDGE THAT I HAVE READ AND THAT I UNDERSTAND EACH AND EVERY ONE OF THE ABOVE PROVISIONS IN THIS WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT AND AGREE TO ABIDE BY THEM.

PLAYER AFFIDAVIT

EACH PLAYER SHOULD READ THE FOLLOWING STATEMENT BEFORE COMPLETING AND SIGNING INVERSE PAGE.

I have received the ASA's Official Rules of Softball and I understand and agree to be bound by the rules of ASA. I am a member in good standing of this softball team and I am eligible to compete with this team in the championship play of the ASA. I understand that I may play on only one team within a division during the season in ASA championship play and this is the team which I have elected to play for this season. I understand and agree that ASA has the right to take permanent possession of a bat that has been determined to be altered. In consideration of my being permitted to compete, I hereby give permission to the ASA and it's local associations to use in any and all publications that they may desire, all pictures taken of the undersigned in their publicizing the game of softball. I hereby subscribe my name in the column for signatures and by doing so certify that I have read this statement and that information supplied on this roster is correct to the best of my knowledge.

PARENT/GUARDIAN AFFIDAVIT

IF PLAYER IS A MINOR, HIS OR HER PARENT OR LEGAL GUARDIAN MUST SIGN ROSTER ON INVERSE PAGE.

NOTE: FOR JUNIOR OLYMPIC DIVISIONS, VERIFICATIONS OF BIRTH DATE FOR EACH PLAYER MUST BE ATTACHED. (i.e., Birth Certificate, Baptismal Certificate or Hospital Certificate may be used.) Legible photo copies will be accepted.

I HEREBY GIVE PERMISSION TO THE TEAM MANAGER, INDICATED BELOW, TO OBTAIN MEDICAL TREATMENT FOR THE MINOR PLAYERS WHICH I AM EITHER PARENT OR LEGAL GUARDIAN, IN THE EVENT THAT I AM NOT AVAILABLE AND MEDICAL TREATMENT IS REQUIRED. On behalf of the minor player, I hereby incorporate by reference and agree to comply with the policies stated in the affidavit.

I also hereby give permission to the ASA and it's local associations to use in any and all publications that they may desire, all pictures taken of the minor player in their publicizing the game of softball. I hereby subscribe my name in the column for signatures and by doing so certify that I have read this statement and that information supplied on this roster is correct to the best of my knowledge.

TEAM MANAGER'S AFFIDAVIT

I am the manager of the above mentioned team and after receiving the ASA's Official Rules of Softball, and after being duly sworn, depose and say that all the information supplied above is correct to the best of my knowledge and that all the players signed the above in their handwriting and they are eligible to compete with my team in the championship play of the ASA and agree to be bound by the rules of ASA as contained in the ASA Code and ASA's Official Rules of Softball.

ASA COMMISSIONER STATEMENT

ALL OF THE INFORMATION ON THIS ROSTER IS CORRECT
TO THE BEST OF MY KNOWLEDGE.

Signature of ASA Local Association Commissioner or designee

Manager's Name (Print)

Manager's signature

Date

Mobile Phone

Manager's Address (Print)

ASA Local Association & Region Number

City _____ State _____

Zip _____ Home Phone _____

Office / Mobile Phone _____

Email _____

Signature of ASA Deputy/District Commissioner



ASA OFFICIAL WAIVER & RELEASE OF LIABILITY & INDEMNIFICATION FORM

20.15 ASA OFFICIAL NATIONAL CHAMPIONSHIP ROSTER

Each player should read the statement on opposite side before completing and signing this roster.

1) Parents/Guardians signature should be on the same numbered line below as the players' name.

2) Players are subject to the ASA Drug Control Procedures and Policies as provided in the ASA Code.

3) By initialing in the column below, you acknowledge you have read and understand the liability waiver and player affidavit information on the reverse side.

Team Name

City & State

Division & Classification of Championship Play
(men/women/boys/girls, slow pitch/fast pitch, 19-under, church, etc.)

NOTE: Team accident insurance is not provided for ASA National Championship play. ASA has made available the voluntary purchase of team accident insurance. See your ASA commissioner for information.

PRINT OR TYPE PLAYER'S NAME	DATE OF BIRTH	PLAYER or PARENT/GUARDIAN SIGNATURE	BONAFIDE RESIDENCE (Street, City, State, Zip)	EMAIL ADDRESS (optional)	INITIALS*
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					



THE NATIONAL GOVERNING BODY
OF SOFTBALL

2015 Girls ASA 14U Class "B"
Eastern National Championship
July 22 – 26, 2015 Canton, OH



THE NATIONAL GOVERNING BODY
OF SOFTBALL

TOURNAMENT SIGNATURE FORM

Team name (As it appears on the Registration Print Out.)

Cell Phone Number

Manager's Name

Manager's Address

City,

State

Zip

Manager's Signature

All players and managers are required to sign this form prior to participating in an ASA National Championship Tournament. Participation is defined as being available at the tournament site and signing this signature form. **Players are reminded that individual players may sign the roster of one and only one team within a division of play throughout the season in any ASA tournament play. Photo ID's are required for all athletes at check-in.**

***** Please list players in Identical Order as Official ASA Roster**

PRINT / TYPE Players Name Completed BEFORE Check-In	Player's Signature Complete AT Check-In	Date of Birth Complete BEFORE Check-In
01) _____	_____	(01 _____
02) _____	_____	(02 _____
03) _____	_____	(03 _____
04) _____	_____	(04 _____
05) _____	_____	(05 _____
06) _____	_____	(06 _____
07) _____	_____	(07 _____
08) _____	_____	(08 _____
09) _____	_____	(09 _____
10) _____	_____	(10 _____
11) _____	_____	(11 _____
12) _____	_____	(12 _____
13) _____	_____	(13 _____
14) _____	_____	(14 _____
15) _____	_____	(15 _____
16) _____	_____	(16 _____
17) _____	_____	(17 _____
18) _____	_____	(18 _____
Coach) _____	_____	(Coach) _____
Coach) _____	_____	(Coach) _____
Coach) _____	_____	(Coach) _____
Coach) _____	_____	(Coach) _____
Coach) _____	_____	(Coach) _____

This form must be attached to the tournament roster and included in the Official Tournament Report.

2015 Girls ASA 14U Class "B" Eastern National Championship

July 22 – 26, 2015 Canton, OH

Amateur Softball Association of America Official Junior Olympic Championship Tournament Requirements



ACE Certification and Bollinger Insurance

The ASA National Council members voted the following Code changes for ASA Junior Olympic (Youth) Championship Play (**Code Article 501 C 03 a&b**) for the 2015 season effective January 1, 2010:

* Any Junior Olympic team participating in championship play must have at least **One ACE Certified Coach** (current year) on the field/dugout during championship play games.

All Junior Olympic team personnel assisting in the dugout must have an **ASA Background Check (current year).

*** Teams playing in Junior Olympic (Youth) Championship Play (Code Article 106 C 01) in 2015 are required to purchase ASA Accident and Liability Insurance on either a team or individual basis through Bollinger Insurance.

Instructions

This form may be used to verify that the team and coaches listed below have met the ASA Code and ASA Board of Directors directive for ACE Coach Certification, background checks and tournament insurance in Championship Tournament play.

Team Name: _____

The coaches listed below have completed their **2015 ACE Coaches Certification**.

Coach Name: _____ Level: _____ Member #: _____ ☐

Coach Name: _____ Level: _____ Member #: _____ ☐

Coach Name: _____ Level: _____ Member #: _____ ☐

Coach Name: _____ Level: _____ Member #: _____ ☐

Coach Name: _____ Level: _____ Member #: _____ ☐

The coaches and team assistances listed below have passed a **2015 ASA Background Check**.

Coach Name: _____ Member #: _____ ☐

Coach Name: _____ Member #: _____ ☐

Coach Name: _____ Member #: _____ ☐

Coach Name: _____ Member #: _____ ☐

Coach Name: _____ Member #: _____ ☐

I have attached a copy of our teams Bollinger Insurance for the 2015 Tournament season.

I have reviewed all the information on this form and it is correct to the best of my knowledge.

Coach/Managers Name: _____

Coach/Mangers Signature: _____ Date: _____

PICK-UP PLAYER FORM



Amateur Softball Association of America
2801 N.E. 50th Street • Oklahoma City, OK 73111
(405) 424-5266 • (405) 424-3855 • www.asasoftball.com

2015 ASA 14U "B" Girls Fastpitch Eastern National

Team Name

Division or Classification of Championship Play

(men or women; boys or girls; slow, fast, 16 inch or modified pitch; age or divisions group)

Instructions. Complete all the above information and attach to your team roster. Mail a copy to the tournament director and reserve a copy for your local commissioner and a copy for your records. If necessary, you may hand carry this form along with your team roster to the tournament and present to the tournament director upon arrival. No pick-up players will be allowed to participate if this form is not presented with your team roster to the tournament director for inspection.

Print or Type Player's Name	Player's Signature	Bonafide Residence Address	Birth Date	Parent's/Guardian's Signature	Relationship	From which team was player picked up? (required)
MANDATORY	MANDATORY	MANDATORY	MANDATORY	MINORS ONLY	MINORS ONLY	Division Class

This certifies that the above listed player meets the requirement of the Article 503 of the ASA Code. See reverse side for Article 503.

Manager's Signature	Date	Manager's Name (Print or Type)	Manager's Address (Print or Type)
Local Association Commissioner's Signature (or Designee)	Date	Cell Phone #	Local Association ASA Region Number

PARENT/GUARDIAN AFFIDAVIT IF PLAYER IS A MINOR, HIS OR HER PARENT OR LEGAL GUARDIAN MUST SIGN THIS FORM.

NOTE. For Junior Olympic divisions, verification of birth date for each player must be attached (i.e. birth certificate, baptismal certificate, hospital certificate may be used). Legible photocopies will be accepted. By signing this form, player or guardian agree to be bound by all terms and conditions contained on the ASA Official Championship Roster as previously signed.

I release, discharge and agree not to sue the team and/or league designated below or any owner or leasee of fields on which softball is played or practiced by my team or the ASA, or their owners, officers, umpires, agents, servants, associations, employees, or any person or entity connected with the team, league, field or the ASA for any claim, damages, cost or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including, but not limited to the negligence, breach of contract or wrongful conduct of these parties hereby released. I further agree that I shall hold harmless and fully indemnify the parties hereby released from any claims, damages, costs including attorney fees, and cause of action which may arise from any claim or cause of action made by me, through me or on my behalf even if the damages, injuries or death are caused in whole or in part by any of the parties or entities hereby released.

I also hereby give permission to the team manager, indicated on this page, to obtain medical treatment for the minor player, which I am either parent or guardian, in the event I am not available and medical treatment is required.

I also hereby give permission to the ASA and its local associations to use, in any and all publications that they may desire, all pictures taken of minor players in their publicizing the game of softball. I hereby subscribe my name in the column for signature and by doing so certify that I have read this statement and that information supplied on this roster is correct to the best of my knowledge.

Article 503 PICK-UP PLAYERS.

A. General Rule. All teams are permitted to pick-up three players as follows:

01. The team adding pick-up players must select eligible roster members from ASA registered teams in the team's own local association.

EXCEPTION: All men's and women's fast pitch divisions, Junior Olympic Boy's Fast Pitch and Junior Olympic Gold Girls' 18-Under Fast Pitch. Pickup players may come from teams within the region that are no longer eligible for championship play. Pick-up players will not be allowed after the National Championship Finals for the National Championship Series.

02. Pick-up players must have played for an ASA-registered team during the current season and must have played in the division of play for which they are being picked up.

03. Pick-up players must be selected only from ASA registered teams no longer eligible for championship play.

04. Pick-up players must be from the team's same division and the same or lower classification.

CLARIFICATION: In Junior Olympic play there are two types of classification, one type of classification is Gold, Class A and Class B; the other type of classification is age classification, 18-Under, 16-Under, 14-Under, 12-Under and 10-Under. Therefore as an example, a player who has competed on a Junior Olympic Girls' Fast Pitch 16-Under team is not an eligible pick-up player for any team below the 16-Under age classification.

05. Players (Adult and Junior Olympics) whose teams have qualified to compete in the highest level tournaments within a classification shall not be eligible pick-up players.

CLARIFICATION: A player who has competed in any Junior Olympic Girls' Fast Pitch National Championship is not an eligible pick-up player for the Girls' 18-Under Gold National Championship.

EXCEPTION: A player who has competed in the Men's 23-Under or Women's 23-Under championship play is eligible to participate in other adult championship play during the same season as a pick-up player.

06. No player may be picked up for National Qualifiers, Junior Olympic Hall of Fame Tournaments or Territory Qualifying tournaments.

07. In adult divisions of play, a pick-up player may be substituted for after participation.

08. In Junior Olympic divisions of play, a pick-up player may not be substituted for after participation.

09. Junior Olympic GOLD and Class A players who compete on adult teams as pick-up players are only eligible to be picked up for Major or Class A teams.

10. A player may play with only one team other than their own team within a division in a season.

11. Teams adding pick-up players must submit a completed official ASA pick-up player form attached to the official roster before the team plays in the tournament.

12. **Pick-up players who chose to participate in the Junior Olympic Girls' Class B program may not have participated in any college softball program.**

B. Fast Pitch, Modified Pitch, and Slow Pitch Pickup Players. A player may be picked up at any level of championship play prior to the National Championship Final as follows:

01. If players are picked up prior to the local association championship, they must be governed by their local association rules.

02. If players are picked up after their local association championship, the pick up player(s) must be governed by **Article 503 of the ASA Code.**

C. Church Slow Pitch and Industrial Slow Pitch Teams. Teams may not pick up any player that does not meet the eligibility requirements of that division of play.

2015 Girls ASA 14U Class "B" Eastern National Championship
Canton, OH July 22 - 26, 2015



Opening Ceremony & Advance Gate Passes

Team Name: _____

Head Coach: _____

E-Mail Address: _____

Phone #1: _____

Phone #2: _____

Deadline: July 15, 2015 @ 4:00pm

Opening Day Ceremony * Papa Bears Pizza Oven Italian Restaurant

The Host Committee will provide each team with pizza, chips, and beverage.

☐ Our team WILL participate in Opening Day Ceremony

_____ # Coaches (limited to 3)

_____ # Athletes (roster players)

☐ Our team will NOT participate in the Opening Day Ceremony

Advance Order Form for Tournament Gate Passes

of Adult Passes X \$30.00 =
(ages 13 and 62)

of Student & Senior Citizen Passes X \$15.00 =
(ages 5 – 12) and (ages 63 and beyond)

Total Amount Enclosed

Please include one payment for entire team order, send check or money order only.

Note: All advance pass sales will be distributed to the team manager at check-in

No refunds will be issued after order is placed or for unused tickets

No gate fee for Roster Players and 3 Coaches

Thank You for Your Order!

Deadline: July 15, 2015 @ 4:00pm

Make checks payable to and mail completed form/fee to:

Canton Recreation, 1414 Market Ave. N., Canton, OH 44714

FOR OFFICE USE ONLY

Receipt # _____

Date: _____

Check # _____

Amt Received: _____

2015 Girls ASA 14U Class "B" Eastern National Championship
Canton, OH July 22 - 26, 2015



Opening Ceremony Team Bio



Coaches/Managers,

During the Parade of Teams the Announcer will present each team to the spectators, fans and other participating teams. Please take a moment to tell us about your team.

Team Name:

Head Coach:

Team Originates From:

City:

State:

2015 ASA Record:

Wins

Loses

Ties

Team Nickname:

Team Motto/Slogan/Highlights:

Directions

CANTON MEMORIAL FIELDHOUSE ** 1815 Harrison Ave. N.W. Canton, Ohio 44708 **

From the North:

I-77 South to Exit 107A, Fulton Road N.W. (S.R. 687). Cross over Fulton Rd. and continue south on Blake Ave. N.W to dead-end, 2nd stop sign. Fieldhouse and school parking areas are on left.

From the South:

I-77 North to Exit 107A, Fulton Road N.W. (S.R. 687). At bottom of ramp, turn left (west) onto Fulton Road. Travel to first traffic signal, Blake Ave. N.W. Turn left (South) onto Blake Ave and continue south on Blake Ave. N.W to dead-end, 2nd stop sign. Fieldhouse and school parking areas are on left.

From the West:

U.S. Rt. 30 & 62 East to I-77 North. Remain on I-77 North to Exit 107A, Fulton Road N.W. (S.R. 687). At bottom of ramp, turn left (west) onto Fulton Road. Travel to first traffic signal, Blake Ave. N.W. Turn left (South) onto Blake Ave and continue south on Blake Ave. N.W to dead-end, 2nd stop sign. Fieldhouse and school parking areas are on left.

From the East:

U.S. Rt. 62 West to I-77 South & Fulton Road N.W. (S.R. 687) loop. **Exit at Fulton Rd.** Cross over Fulton Rd. and continue south on Blake Ave. N.W to dead-end, 2nd stop sign. Fieldhouse and school parking areas are on left.

WILLIG FIELD SOFTBALL COMPLEX **2300 – 30th Street N.E. Canton, Ohio 44705**

From the North:

I - 77 South to Route 62 East, Exit 107B (Alliance Exit). Travel approximately 2 miles and exit at Harrisburg Road. Drive directly across at the end of the exit ramp. (4 way stop) Park is on your right.

From the South:

I - 77 North to Route 62 East, Exit 107B (Alliance Exit). Travel approximately 2 miles and exit at Harrisburg Road. Drive directly across at the end of the exit ramp. (4 way stop) Park is on your right.

From the East:

Route 76 West to I -77 South to Route 62 East, Exit 107B (Alliance Exit). Travel approximately 2 miles and exit at Harrisburg Road. Drive directly across at the end of the exit ramp. (4 way stop) Park is on your right.

From the West:

Route 76 East to I -77 South to Route 62 East, Exit 107 B (Alliance Exit). Travel approximately 2 miles and exit at Harrisburg Road. Drive directly across at the end of the exit ramp. (4 way stop) Park is on your right.

From Carl 'Weis' Park to Willig Field:

From Logan Ave., turn left onto 25th Street NW. At traffic light turn left onto Market Ave. N, stay in right lane, merge right onto the US Route 62 East. (Alliance) Travel approximately 1 mile and exit at Harrisburg Road. Drive directly across at the end of the exit ramp. (4 way stop) Field is on the right.

CARL 'WEIS' PARK **2600 Harvard Ave. N.W. Canton, Ohio 44709**

From McKinley Grand Hotel:

North on Market Ave. (approx. 1.8 miles). Turn left onto 25th St. NW Travel 2 blocks. Turn right onto Logan Ave (just beyond the Library). Fields are just ahead, past tennis courts.

From Willig Field to Carl 'Weis' Park:

West on Rt. 62. Exit at 30th St/Market Ave. N. Continue in center thru lane, crossing over Market Ave. (2nd light) Turn left onto Harvard Ave. NW (3rd light) proceed about ¼ mile, turn left at 1st drive past House of Loreto Nursing Home. Fields are to your left and just left of the tennis courts.

From I 77 North/South:

I – 77 North/South to Route 62 East, Exit 107B (Alliance Exit). Exit at Market Ave. N/Rt.43. Turn right onto Market Ave. N. Turn right onto 25th St. NW (1st light) Travel 2 blocks. Turn right onto Logan Ave (just beyond the Library.) Fields are just ahead, past tennis courts.

Lodging

PREFERRED HOTEL ACCOMMODATIONS

For 2015 Girl's 14U Class 'B' Eastern National ASA Softball Tournament

Note: Total Stark County Room Tax 12.50% tax

HOST HOTEL:

1.) McKinley Grand Hotel \$89.99 night Reservation Code: (ASA Softball)
320 Market Ave. S. Canton, Ohio 44702 (Phone# 1-877-454-5008)

NOTE: (Pro Football Hall of Fame Enshrinees stay here each year)
(USA Olympic Women's Fastpitch Team stayed here in 2010)

OTHER PREFERRED HOTELS:

2.) Comfort Inn Canton \$94.00 night Reservation Code: (ASA Softball)
5345 Broadmoor Circle N.W. Canton, Ohio 44709 (Phone# 330-492-1331)

3.) Quality Inn Hall of Fame \$91.00 night Reservation Code: (ASA Softball)
3970 Convenience Circle N.W. Canton, Ohio 44718 (Phone# 866-460-7456) (On Site Laundry Facilities)

4.) Holiday Inn Reservation Code: (ASA Softball)
4520 Everhard Road N.W. Canton, Ohio 44718 (Phone# 330-494-2770)

5.) Courtyard Marriott Reservation Code: (ASA Softball)
4375 Metro Circle N.W. Canton, Ohio 44720 (Phone# 330-494-6494)

Local Laundromats

Coinway Laundry
1130 Wertz Ave NW
Canton, OH 44708
330-452-6743
6:30am-9:30pm, 7 days

Hometown Laundry
707 S. Main St.
N Canton, OH 44720
330-497-8676
24 Hrs. 7 days

Melletts Plaza Laundry Express
3804 Tuscarawas St. W
Canton, OH 44708
330-477-9918
Mon-Fri, 7:30am-9:30pm
Sat-Sun, 6:30am-9:30pm

North Canton Laundromat
1664 N. Main St
North Canton, Oh 44720
330-284-6144
24 Hrs. 7 days

Subs and Subs More
3102 Cromer Ave NW
Canton, OH
330-492-2386
7:30am-8:15pm, 7 days

Lake Cable Laundromat
5284 Fulton Rd NW
Canton, OH 44718
330-284-6144
24 Hrs, 7 days

Recreational Activities

The Belden Village Mall with over 200 stores www.shoppingbeldenvillagemall.com

4230 Belden Village Mall, Canton OH 44718 Telephone: (330) 494-8815

The Pro Football Hall of Fame www.profootballhof.com

2121 George Halas Dr. NW, Canton, OH 44708 Telephone: (330) 456-8207

Contact Canton Recreation @ 330-456-4521 for Discount Passes for the Pro Football Hall of Fame or at Willig Field

McKinley Monument and Museum of History & Science and Industry <http://www.mckinleymuseum.org/>

800 McKinley Monument Drive NW, Canton, OH 44708 Telephone: (330) 455-7043

Sluggers & Putters www.Sluggers_Putters.com

333 Lafayette Drive NW, Canal Fulton, OH 44614 Telephone: (330) 330-854-6999

Canton Classic Car Museum <http://cantonclassiccar.org/>

123 6th Street Southwest, Canton, OH 44702 Telephone: (330) 455-3603

London's Chocolate Factory <http://www.harrylondon.com>

5353 Lauby Rd, North Canton, OH 44720 Telephone: (330) 494-0833

Walking track at Stadium Park (east bound, across I-77 from The Pro Football Hall of Fame)

1200 Stadium Park Dr. NW, Canton, OH 44718

and Over 16 golf courses

Visit www.visitcantontark.com for a complete listing of Restaurants and Activities

Willig Field Complex & Weis Park Policies and Procedures

Small children must be supervised at all times.

On-site playgrounds are available; these areas are PLAY AT YOUR OWN RISK AREAS.

No Pets/Animals – Certified Service Animals are permitted in the complex.

No Alcohol Beverages – Any person caught with or using alcohol will be ejected from the complex

for the remainder of that day and could lead to denial of entry on the following day(s) as well.

No Smoking permitted inside the Willig Field Complex. Smoking is permitted in the parking lots only.

No Noise Makers or noise making toys.

No Grills are permitted inside Willig Field Complex.

No Coolers are permitted inside the complex. (Teams are permitted one (1) cooler per dugout at game time.)

No Wheeled Toys of any kind are permitted inside the complex. (bikes, skateboards, scooters, and shoes, etc.)

Free Parking – There is free parking at both field locations. Motor homes are permitted but please use your best judgment when setting up and give people room to park. No overnight parking at either field.

This is an ASA sanctioned tournament and as such, excessive behavior and/or the use of profanity by any adult or player may lead to ejection from the playing site. You can be removed by the Umpire, Tournament Director, ASA Tournament Officials, and Canton Joint Recreation District Officials without a refund.